

# 2022 ANNUAL WARRIOR SURVEY

## KEY TOPIC FACT SHEET: MENTAL HEALTH

Data from the Annual Warrior Survey (AWS) is representative of the 165,967 wounded warriors who were registered with Wounded Warrior Project® (WWP) as of April 2022 — referred to as “WWP warriors” throughout this document.



### COMPARISON: WWP WARRIORS WITH AND WITHOUT MENTAL HEALTH COMORBIDITIES\*

	WWP WARRIORS WITH NO PRESENCE OF MODERATE TO SEVERE MENTAL HEALTH SYMPTOMS (37%)	WWP WARRIORS PRESENTING WITH MODERATE TO SEVERE SYMPTOMS...	
		FOR ONE MENTAL HEALTH CONDITION (14%)	FOR TWO OR MORE MENTAL HEALTH CONDITIONS (50%)
<b>Pain<sup>†</sup></b> mean score, range 0-10	4.0	5.2	6.2
<b>Physical health<sup>†</sup></b> did not meet the World Health Organization's daily requirements of 10 MET-hours per week <sup>3,4</sup>	58%	66%	68%
<b>Traumatic brain injury (TBI)</b> self-reported	27%	35%	44%
<b>Loneliness<sup>§</sup></b>	39%	69%	85%
<b>Seeking help</b> visited a professional at least once in the past 12 months to help with issues such as stress, emotional, alcohol, drug, or family problems	45%	70%	81%
<b>Drug abuse<sup>**</sup></b> reported using drugs, other than for medical reasons, in the past year	11%	16%	17%
<b>Sleep<sup>††</sup></b> reported getting less than the recommended seven hours of sleep per night	65%	79%	87%
<b>Financial strain<sup>††</sup></b> reported being unable to make ends meet at some point in the past 12 months	48%	63%	76%



#### AT A GLANCE:

WWP WARRIORS WITH MENTAL HEALTH COMORBIDITIES\*

**50%** of WWP warriors presented with moderate to severe symptoms for two or more mental health conditions.

**AGE:** 53% of WWP warriors with mental health comorbidities are between the ages 35-44.

**SEX:** Female warriors are more likely to have mental health comorbidities than male warriors.

**RACE:** White WWP warriors are less likely to have mental health comorbidities than other races.

**EDUCATION:** WWP warriors with a bachelor's degree or higher are less likely to have mental health comorbidities.

**RURAL WARRIORS:** There is no difference between rural and urban WWP warriors and the likelihood of having mental health comorbidities.

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### IN FOCUS: POST-TRAUMATIC GROWTH (PTG)<sup>§§</sup>

**PTG** is a new measure for 2022 AWS and measures positive coping following trauma, such as appreciation for life.<sup>8</sup>

Overall, WWP warriors have a mean growth score of **20.3**. In comparison, WWP warriors with mental health comorbidities have a mean growth score of **19.6**.

There is a positive relationship between age and PTG scores; as WWP warriors get older their PTG scores tend to get **higher**.



### INFLUENCING FACTORS

**Barriers to care:** Negative experiences or obstacles to accessing care may influence or delay timely, beneficial support for mental health.<sup>9</sup>

**Stigma:** Progress has been made to address and diminish stigmatization associated with mental health conditions; however, there is still further work that needs to be done.<sup>10</sup>

**Interconnected relationship between physical and mental health:** It is important to acknowledge the holistic impact of physical and mental health, particularly within the WWP population.<sup>11</sup>

# HOW IS WWP ADDRESSING THIS ISSUE?

## WWP PROGRAMS AND SERVICES

In the 2022 AWS, nearly seven in 10 WWP warriors reported visiting a professional at least once in the past 12 months to help with issues such as stress, emotional, alcohol, drug, or family problems (66%). WWP helps support warriors by providing accessible and innovative solutions to mental health support, including four programs/services focused on mental health: Warrior Care Network®, WWP Talk, Project Odyssey®, and Complex Case Coordination (C3). Each of these programs are designed to support and empower post-9/11 veterans and their families in building resilience and overcoming any mental health challenges.

*Data provided in "FY22 highlights" is based on events and services from October 2021 through September 2022.*

### FY22 GENERAL HIGHLIGHTS:

- Over 2,691 newly registered WWP warriors who were referred to WWP's mental health programs received a welcome call from the WWP mental health team to help engage and connect them with the resources they needed.
- WWP's mental health team made more than 5,600 referrals to external mental health providers to connect WWP warriors and family members with the resources and services they needed, resulting in over 25,000 therapy sessions.

### WARRIOR CARE NETWORK

Warrior Care Network is a partnership between WWP and four world-renowned academic medical centers, providing veterans and service members living with PTSD, TBI, military sexual trauma (MST), and other related conditions with a path to long-term wellness. Participants and their families receive first-class treatment tailored specifically to their needs and individualized care to support their unique journey. All treatment and accommodations are provided at no cost and financial assistance is also offered to help cover everyday expenses like groceries, utilities, and housing.

**FY22 highlight:** Warrior Care Network provided over 54,000 hours of treatment for PTSD, TBI, MST, and substance use disorder for more than 1,500 WWP warriors and family support members.

### WWP TALK

WWP Talk is a non-clinical telephonic emotional support program that connects warriors, their spouses, and other family members with a dedicated and empathetic listener. This specialist will listen and provide guidance to set tangible goals and develop skills that lead to positive changes, like increased resiliency and improved psychological well-being.

**FY22 highlight:** WWP Talk facilitated over 17,000 emotional support calls with almost 1,800 WWP warriors and family support members.

### PROJECT ODYSSEY

Project Odyssey is a 12-week mental health program for warriors that uses adventure-based learning to help warriors with PTSD, anxiety, and depression manage and overcome their invisible wounds, enhance their resiliency skills, and empower them to live productive and fulfilling lives.

**FY22 highlight:** Project Odyssey provided 191 programs and served more than 2,400 WWP warriors and family support members.

### C3

WWP's C3 team serves warriors with complex challenges which are multifaceted and require urgent action. These cases exceed the capability of other WWP programs due to their complex nature. The team takes an integrated approach, leveraging diverse internal and external resources, to address all components of the case concurrently.

**FY22 highlight:** The C3 team worked 834 complex cases in FY22.

## WWP ADVOCACY

The Government Affairs team at WWP provides a voice for warriors, family members, and caregivers by highlighting the challenges they face and advocating for change through veteran policies and initiatives. Here are some of our current legislative priorities that support veteran mental health through advocacy:

### **Ensure community alignment:**

Continue to pursue a public health approach that coordinates action from all government as well as public-private partnerships. Programs to help veterans address invisible wounds from service, including the Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program, Mission Daybreak, and the Governor's Challenge to Prevent Suicide should be sufficiently funded and aligned.

### **Increase focus on opioid and substance use disorders:**

Promote stronger care and coordination for opioid and substance use disorders, as well as co-occurring mental health disorders, by enhancing internal VA capacity, post-care planning, and referrals to community providers.

### **Improve access to residential care:**

Ensure that veterans in need of inpatient residential care can access it in a timely and efficient manner. VA case coordination services should promote efficient connection to VA and community-based resources when veterans are ready to enter treatment.

### **Continue to leverage telehealth:**

Connect more veterans to care by addressing issues such as broadband access, IT infrastructure, VA care access points, and interstate medical practice rules for community mental health providers.

## WWP PARTNERSHIPS

WWP believes that no one organization can meet the needs of all wounded, injured, or ill veterans alone. By collaborating with other military and veteran support organizations, we amplify the effects of our efforts. Our investments and unfunded partnerships in the military and veteran community fill gaps in our programs and reinforce our existing efforts. Our current partnerships addressing mental health among veterans include:

- Boulder Crest Foundation
- BrainLine
- Code of Support Foundation
- Cohen Veterans Network
- Eisenhower Center
- Headstrong
- Melwood
- Navy SEAL Foundation
- U.S.VETS
- Vets4Warriors
- Veteran's PATH
- Warrior Canine Connection
- Warrior Reunion Foundation

## FOOTNOTES

\* Mental health comorbidities refer to WWP warriors who present with symptoms for two or more mental health conditions out of PTSD, depression, and anxiety.

† Pain was measured using the Pain, Enjoyment of Life and General Activity scale (PEG scale).<sup>1</sup> This screening tool is best used to detect changes over time in the same individual, but in general, a higher score indicates more severe pain and pain-related interference with life and activities.

‡ Physical health was measured using the Physical Activity Scale for Persons with Physical Disabilities (PASIPD).<sup>2</sup> This scale measures the “metabolic equivalent value” (MET), which indicates the intensity of the exercise.

§ Loneliness was measured using the Three-Item Loneliness Scale.<sup>5</sup> Higher scores indicate greater loneliness, where final scores can be grouped as not lonely (scores 3 to 5) or lonely (score 6 to 9).

\*\* Drug use besides for medical reasons was measured using an item from the Drug Abuse Screening Test (DAST-10).<sup>6</sup>

†† Hours of sleep per night was taken from the Pittsburgh Sleep Quality Index (PSQI).<sup>7</sup> *PSQI is copyright 1989 and 2010. University of Pittsburgh. All rights reserved.*

‡‡ Financial strain was measured as not having enough money to make ends meet at some point in the past 12 months.

§§ Post-traumatic growth was measured using the Post-Traumatic Growth Index (PTGI).<sup>8</sup> Higher scores indicate more growth.

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